

TITLE COMPANY NAME \_\_\_\_\_ FAX # \_\_\_\_\_ PHONE # \_\_\_\_\_

ESCROW# \_\_\_\_\_ CLOSE OF ESCROW \_\_\_\_\_ OCCUPANCY DATE \_\_\_\_\_

SELLER \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_

BUYER \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_

BUYER'S PHONE NUMBER \_\_\_\_\_

TO BETTER SERVE OUR MUTUAL CUSTOMERS, PLEASE BE SURE THE MAILING ADDRESS FOR NEW BUYER IS ACCURATE!

PLAT \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ PARCEL NO. \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

PROPERTY IS: VACANT \_\_\_\_\_ IMPROVED \_\_\_\_\_ NEW CONSTRUCTION \_\_\_\_\_ SEWER CONNECTION PAID \_\_\_\_\_ DATE \_\_\_\_\_

ESCROW OFFICER (Please Print and Sign)

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☐ NOTICE OF EASEMENT: If this box is checked, the property owner should be aware that an active easement may be present on the property. An active easement must remain clear for operation and maintenance purposes. Nothing may be constructed or planted within an active easement without permission from the District.

AVAILABILITY FEES: (APPLIES TO VACANT LAND ONLY)

AMOUNT OF THE AVAILABILITY FEE IS \$ \_\_\_\_\_ PAID ANNUALLY AND COVERS THE TIME PERIOD

FROM \_\_\_\_\_ TO \_\_\_\_\_.

- ☐ AVAILABILITY FEE HAS BEEN PAID
- ☐ AVAILABILITY FEE HAS NOT BEEN PAID (PLEASE COLLECT).
- ☐ AVAILABILITY FEE IS PAST DUE, PLEASE COLLECT A LATE FEE OF \$ \_\_\_\_\_.
- ☐ A LIEN HAS BEEN FILED ON THIS PROPERTY.
- ☐ NO AVAILABILITY FEE ASSESSED FOR THIS FISCAL YEAR.

SEWER USER FEES: (APPLIES TO IMPROVED PROPERTY)

(SEWER USER FEES ARE PAID QUARTERLY IN ADVANCE & ARE DUE THE FIRST DAY OF JANUARY, APRIL, JULY, AND OCTOBER.

A LATE CHARGE PLUS INTEREST IN THE AMOUNT OF 10% PER ANNUM IS ASSESSED ON ALL PAST DUE BALANCES)

AMOUNT OF THE CURRENT SEWER USER FEE IS \$ \_\_\_\_\_ PAID QUARTERLY AND COVERS THE TIME PERIOD

FROM \_\_\_\_\_ TO \_\_\_\_\_.

- ☐ SEWER USER FEE HAS BEEN PAID.
- ☐ SEWER USER FEE HAS NOT BEEN PAID (PLEASE COLLECT). \$ \_\_\_\_\_ FOR THE TIME PERIOD OF \_\_\_\_\_ TO \_\_\_\_\_.
- ☐ SEWER USER FEE IS PAST DUE, PLEASE COLLECT \$ \_\_\_\_\_.
- ☐ A LIEN HAS BEEN FILED ON THIS PROPERTY. LIEN WILL BE RELEASED UPON PAYMENT IN FULL.

IN ADDITION, PLEASE COLLECT \$ \_\_\_\_\_ FOR THE TIME PERIOD OF \_\_\_\_\_ TO \_\_\_\_\_.

Comments: \_\_\_\_\_

**PAYMENTS ARE ACCEPTED FROM CUSTOMERS UNTIL PROOF OF CLOSING HAS BEEN RECEIVED.  
PLEASE CALL TO UPDATE PRIOR TO CLOSING TO ELIMINATE DUPLICATE PAYMENTS! THANK YOU!**

**PLEASE FAX INQUIRY BACK AFTER CLOSE OF ESCROW OR INCLUDE COPY WITH PAYMENT.**

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Fountain Hills Sanitary District would like to acknowledge and thank you for the assistance you provide the District.

We appreciate all your help!

COMMENTS: \_\_\_\_\_ LEGAL AND PARCEL DO NOT MATCH \_\_\_\_\_ LEGAL AND ADDRESS DO NOT MATCH  
\_\_\_\_\_ LEGAL DESCRIPTION NEEDED \_\_\_\_\_ NEW BUYER'S MAILING ADDRESS NEEDED

FOUNTAIN HILLS SANITARY DISTRICT

16941 E. Pepperwood Circle

Fountain Hills, AZ 85268

12/3/2009

(480) 837-9444

Fax (480) 837-0819

DATE

BILLING A/C NO. \_\_\_\_\_